

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10 349494	FILING DATE				
CLAIMS						OFFICIAL USE					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.	IND.	DEF.
1						51					
2						52					
3						53					
4						54					
5						55					
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39						89					
40						90					
41						91					
42						92					
43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL	4					TOTAL					
TOTAL	179					TOTAL					
TOTAL	24					TOTAL					